

State of Idaho

LOBBYIST REPORT FORM ANNUAL

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SECRETARY OF STATE STATE OF IDAHO

Ben Ysursa Secretary of State

(Type or print clearly in black ink)

LOBBYISTS (Sec. 67-6619)

To Be Filed By:

| See instructions at bottom of page | | | | - Of TUAHO | | |
|--|--------------------------|------------------------|--------------------------|--------------------------|--|--|
| Lobbyist's name and permanent business address VICKI SMITH | | Date prepared | Period | d covered | | |
| IDAHO VETERINARY MEDICA | ASSN. | | | year ending | | |
| 1841 W SECLUDED CT. | .,, | / /- 08 | (Mc | o.) (Day) (Yr.) | | |
| KUNA, 10 83634 | | | 16 | 2 31 07 | | |
| Item 1 Totals of all reportable expenditures mad | e or incurred by Lobbyis | t or by Lobbyist's Emp | loyer on behalf of Lob | byist's Employer. | | |
| Category of Expenditure Reimbursed Personal Living and Travel *Total Amount for Proportionate amounts contributed by each employer (Identify employers, under Item 3, at bottom of page.) | | | | | | |
| Expenses Pertaining to Lobbying Activity Do Not Have to be Reported All Employers | Employer No. 1 | Employer No. 2 | Employer No. 3 | Employer No. 4 | | |
| Entertainment Food and Refreshment \$ | | \$ | \$ | \$ | | |
| Living Accommodations | | | | | | |
| Advertising | | | | | | |
| Travel | | | | | | |
| Telephone | | | | | | |
| Other Expenses or Services | | | | | | |
| Total \$ | \$ | \$ | \$ | \$ | | |
| *When the number of employers you are reporting for req | | | | | | |
| Item The totals of each expenditure of more than fift | | | | | | |
| 2 Date Place | Amou | Names of Legi | slators, Public and Exec | utive Officials in Group | | |
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| INSTRUCTIONS | | Employer(s) Name(s) and Address(es) | | | |
|--|---------------|--|--|--|--|
| Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code | No. 1 /8 K | DADO VETERINARY MEDICAL ASSN. 41 W SECLUDED CT. UNA, 10 \$3634 | | | |
| Filing deadline: Annual report is due on <u>January 31st</u> . Executive Lobbyist semi-annual report due July 31st. | No. 2 | | | | |
| TO BE FILED WITH: Ben Ysursa Secretary of State PO Box 83720 Boise, ID 83720-0080 Phone: (208) 334-2852 Fax: (208) 334-2282 | | | | | |
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| Item 4 | | Expenditures made by the lobbyist or by the lobbyist's employer in the nature of contributions of money or other tangible or intangible personal property to any Legislator, Public or Executive Official or for or on behalf of any Legislator, Public or Executive Official. | | | | | | | |
|----------------------|--|--|---|--|--|------|------|--|--|
| | Date | Amount | Nan | Name of Legislator, Public or Executive Official Receiving or Benefiting | | | | | |
| Item 5 Subject (from | Subject matter or House Bill, the Lobbyist v | of proposed legislati Resolution or other was supporting or or | on, the number of the Senate legislative activity in which | | LEGISLATIVE SUB Subject Agriculture, horticulture, farming, and livestock Amusements, games, athletics and sports Banking, finance, credit and investments Children, minors, youth, senior citizens Church and religion Consumer affairs Ecology, environment, pollution, conservation, zoning, land and water use Education Elections, campaigns, voting, political parties Equal rights, civil rights, minority affairs Government, financing, taxation, revenue, budget, appropriations, bids, fees, funds Government, county Government, federal Government, special districts Government, state | JECT | | | |
| Item 6 | contract bid | | lecision, procurement, ancial services agreement or opposing. | - | ERTIFICATION: I hereby certify the prect statement in accordance with stat | | | | |
| | | | | _ | nployer No. 1 signature | | Date | | |
| | | | | _ | mployer No. 3 signature | | Date | | |
| | | | | Er | nployer No. 4 signature | | Date | | |